

SCHEDULE E (FEC Form 3X) **ITEMIZED INDEPENDENT EXPENDITURES**

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FOR LINE 24 OF FORM 3X

NAME OF COMMITTEE (In Full) EMILY's List		FEC IDENTIFICATION NUMBER C C00193433	
Check if <input type="checkbox"/> 24-hour notice <input type="checkbox"/> 48-hour notice			
Full Name (Last, First, Middle, Initial) of Payee Moxie Media, Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address 2021 Minor Avenue East		Amount 6461.50	
City State Zip Code Seattle WA 98102		Transaction ID: SE24-105187	
Purpose of Expenditure Mailing Services		Office Sought: <input checked="" type="checkbox"/> House State: WA <input type="checkbox"/> Senate District: 8 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Darcy Burner		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 303732.99			
Full Name (Last, First, Middle, Initial) of Payee Precision Communications Inc.		Date M M / D D / Y Y Y Y 1 0 / 2 6 / 2 0 0 6	
Mailing Address 8601 Georgia Ave., Suite 806		Amount 14593.75	
City State Zip Code Silver Spring MD 20910		Transaction ID: SE24-99179	
Purpose of Expenditure Phone Banks		Office Sought: <input checked="" type="checkbox"/> House State: IL <input type="checkbox"/> Senate District: 6 <input type="checkbox"/> Presidential	
Category/Type		Check One: <input checked="" type="checkbox"/> Support <input type="checkbox"/> Oppose	
Name of Federal Candidate supported or Opposed by expenditure: Tammy Duckworth		Disbursement For: <input type="checkbox"/> Primary <input checked="" type="checkbox"/> General 2006 <input type="checkbox"/> Other (specify) : _____	
Calendar Year-To-Date Per Election for Office Sought 252259.84			
(a) SUBTOTAL of Itemized Independent Expenditures		21055.25	
(b) SUBTOTAL of Unitemized Independent Expenditures		0.00	
(c) TOTAL Independent Expenditures			
Under penalty of perjury I certify that the independent expenditures reported herein were not made in cooperation, consultation, or concert with, or at the request or suggestion of, any candidate or authorized committee or agent of either, or (if the reporting entity is not a political party committee) any political party committee or its agent.			
Caroline C Fines Signature		Date M M / D D / Y Y Y Y 1 2 / 0 6 / 2 0 0 6	